



PTO/SB/21 (09-04)

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/881,080
Filing Date	June 12, 2001
First Named Inventor	GUINAN, Terry et al.
Art Unit	3743
Examiner Name	ODLAND, Kathryn P.
Attorney Docket Number	PA936 US

**ENCLOSURES (Check all that apply)**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):<br>Amendment to Add Inventor; Consent of Assignee; Redlined Copy of Filing Receipt; see below for additional papers. |
|---|--|--|

**Remarks**

Executed Supplemental Declaration/Power of Attorney; Statement of Person to be Added as an Inventor; Supplemental Application Data Sheet; and Return Postcard

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**Firm Name  
Medtronic Vascular, Inc.

Signature

Printed name

Catherine C. Maresh

Date

November 5, 2004

Reg. No.

35,268

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Typed or printed name

Kimberly Melvin

Date

November 5, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



IFW/AF-61/A 3743

<b>CERTIFICATE OF MAILING</b> I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on November 5, 2004. Signed: <u>Kimberly Melvin</u> Kimberly Melvin
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 09/881,080 Confirmation No.: 8025  
Applicant : GUINAN, Terry et al.  
Filed : June 12, 2001  
TC/A.U. : 3743  
Examiner : ODLAND, Kathryn P.  
  
Docket No. : PA936  
Customer No. : 28390  
Title : TIP SEAL TIP ATTACH

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT, REQUEST AND FEE TO DELETE AND/OR ADD TO ORIGINAL  
ERRONEOUSLY NAMED OR NOT NAMED INVENTOR(S) IN – NONPROVISIONAL  
APPLICATION – DECLARATION (37 CFR §1348(a))**

Sir:

This amendment and request is to correct the incorrect original naming of inventor in the declaration under 37 CFR §1.48(a) as set for and filed on August 15, 2001.

Applicants request that addition of the following previously unnamed person as inventor of this application: **Ronan Rogers**.

Attached is the Supplemental Combined Declaration, Power of Attorney and Assignment and Statement under 37 CFR §1.48(a)(2) of A Person to Be Added As An Inventor.

The Commissioner is hereby authorized to charge the \$130.00 petition fee set forth in §1.17(h). Furthermore, the Commissioner is hereby authorized to charge any additional fees which may be required under 37 C.F.R. 1.17, or credit any overpayment, to Deposit Account No. 01-2525.

11/10/2004 YPOLITE1 00000049 012525 09881080  
01 FC:1460 130.00 DA

Respectfully submitted,  
  
Catherine C. Maresh  
Reg. No. 35,268

Medtronic Vascular, Inc.  
3576 Unocal Place  
Santa Rosa, CA 95403  
Fax: (707) 543-5420

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on November 5, 2004.

Signed: \_\_\_\_\_

Kimberly Melvin

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appln. No. : 09/881,080 Confirmation No.: 8025  
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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**CONSENT OF THE ASSIGNEE UNDER 37 CFR §1.48(a)(4)**

Sir:

Medtronic Vascular, Inc., assignee of the entire right, title and interest of the originally names inventors of the above-captioned application, consents to the change in inventorship from Terry Guinan, John Connolly, Pat Duane, Donagh O'Shaughnessy; and Michael Bannon to Terry Guinan, John Connolly, Pat Duane, Donagh O'Shaughnessy; Michael Bannon; and Ronan Rogers. I have read and understand 37 CFR §10.18(b).

For: Medtronic Vascular, Inc.

Signature: \_\_\_\_\_

Catherine C. Maresh  
Senior Patent Counsel

Date: November 5, 2004

## **APPLICATION DATA SHEET,**

### **APPLICATION INFORMATION**

Application Number:: 09/881,080  
Filing Date:: June 12, 2001  
Application Type:: Regular  
Subject Matter:: Utility  
Title:: Tip Seal Tip Attach  
Attorney Docket Number:: PA936 US  
Request for Early Publication?: No  
Request for Non-Publication?: No  
Total Drawing Sheets:: 1  
Small Entity:: No

### **APPLICANT INFORMATION**

Applicant Authority Type:: 1<sup>st</sup> Inventor  
Primary Citizenship Country:: IE  
Status:: Full Capacity  
Given Name:: TERRY  
Family Name:: GUINAN  
City of Residence:: Galway  
Country of Residence:: Ireland  
Street of mailing address:: Parkmore Business West  
City of mailing address:: Galway  
Country of mailing address:: Ireland

Applicant Authority Type:: 2<sup>nd</sup> Inventor  
Primary Citizenship Country:: IE  
Status:: Full Capacity  
Given Name:: JOHN  
Family Name:: CONNOLLY  
City of Residence:: Galway  
Country of Residence:: Ireland  
Street of mailing address:: Parkmore Business West  
City of mailing address:: Galway  
Country of mailing address:: Ireland



Applicant Authority Type:: 3<sup>rd</sup> Inventor  
Primary Citizenship Country:: IE  
Status:: Full Capacity  
Given Name:: PAT  
Family Name:: DUANE  
City of Residence:: Galway  
Country of Residence:: Ireland  
Street of mailing address:: Parkmore Business West  
City of mailing address:: Galway  
Country of mailing address:: Ireland

Applicant Authority Type:: 4<sup>th</sup> Inventor  
Primary Citizenship Country:: IE  
Status:: Full Capacity  
Given Name:: DONAGH  
Family Name:: O'SHAUGHNESSY  
City of Residence:: Galway  
Country of Residence:: Ireland  
Street of mailing address:: Parkmore Business West  
City of mailing address:: Galway  
Country of mailing address:: Ireland

Applicant Authority Type:: 5<sup>th</sup> Inventor  
Primary Citizenship Country:: IE  
Status:: Full Capacity  
Given Name:: MICHAEL  
Family Name:: BANNON  
City of Residence:: Galway  
Country of Residence:: Ireland  
Street of mailing address:: Parkmore Business West  
City of mailing address:: Galway  
Country of mailing address:: Ireland

Applicant Authority Type::	6 <sup>th</sup> Inventor
Primary Citizenship Country::	IE
Status::	Full Capacity
Given Name::	RONAN
Family Name::	ROGERS
City of Residence::	Galway
Country of Residence::	Ireland
Street of mailing address::	41 Cluain Riocaird, Headford Road
City of mailing address::	Galway
Country of mailing address::	Ireland

### **CORRESPONDENCE INFORMATION**

Correspondence Customer Number::	28390
Name::	Medtronic Vascular, Inc.
Street of mailing address::	3576 Unocal Place
City of mailing address::	Santa Rosa
State/Province of mailing address::	CA
Country of mailing address::	US
Postal/Zip Code of mailing address::	95403
Phone Number::	(707) 543-0221
Fax Number::	(707) 543-5420
E-Mail address::	catherine.maresh@medtronic.com

### **ASSIGNEE INFORMATION**

Assignee name::	Medtronic Vascular, Inc.
Street of mailing address::	3576 Unocal Place
City of mailing address::	Santa Rosa
State/Province of mailing address::	CA
Country of mailing address::	US
Postal/Zip Code of mailing address::	95403



PA936 US

Practitioner's Docket No. P936 US

**PATENT**

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**SUPPLEMENTAL COMBINED DECLARATION AND POWER OF ATTORNEY**  
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,  
CONTINUATION, OR C-I-P)

---

As a below named inventor, I hereby declare that:

**TYPE OF DECLARATION**

This declaration is for an original application.

**INVENTORSHIP IDENTIFICATION**

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am an original, first and joint inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

**TIP SEAL TIP ATTACH**

**SPECIFICATION IDENTIFICATION**

The specification was filed on June 12, 2001, U.S. Serial No. 09/881,080.

**ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR**

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56, and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, and in compliance with this duty, there is attached an information disclosure statement, in accordance with 37 C.F.R. § 1.98.

**POWER OF ATTORNEY**

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

**APPOINTED PRACTITIONER(S)**

Michael J. Jaro  
Catherine C. Maresh  
Janis J. Biksa  
James F. Crittenden  
Alan F. Krubiner

**REGISTRATION NUMBER(S)**

34,472  
35,268  
33,648  
39,560  
29,289

I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

**28390**

**SEND CORRESPONDENCE TO**

IP Legal  
Medtronic Vascular, Inc.  
3576 Unocal Place  
Santa Rosa, CA 95403  
28390

**DIRECT TELEPHONE CALLS TO:**

Phone (707) 543-0221

**DECLARATION**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**SIGNATURE(S)**

**RONAN ROGERS**

Inventor's signature

Date 28<sup>th</sup> Oct

Residence Galway City, County Galway, Ireland

Post Office Address 41 Cluain Riocaird, Headford Road, Galway City, County Galway, Ireland

Ronan Rogers

Country of Citizenship IE

\*\*\*\*\*





IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 09/881,080 Confirmation No.: 8025  
Applicant : GUINAN, Terry  
Filed : June 12, 2001  
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Docket No. : PA936  
Customer No. : 28390  
Title : TIP SEAL TIP ATTACH

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**STATEMENT UNDER 37 CFR §1.48(A)(2)**  
**OF A PERSON TO BE ADDED AS AN INVENTOR**

Sir:

I am a co-inventor of the invention of one or more claims in the above-captioned nonprovisional application for which an oath or declaration under 37 CFR §1.63 has been filed erroneously not naming me as an inventor. The inventorship occurred without deceptive intent on my part. I have read and understand 37 CFR §10.18(b).

Date: 28<sup>th</sup> Oct '04

Signed: Ronan Rogers  
Ronan Rogers



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov

**COPY**

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/881,080	06/12/2001	3762	840	P936 US	1	1	1

CONFIRMATION NO. 8025

## UPDATED FILING RECEIPT



\*OC000000006581471\*

IP Legal  
Medtronic AVE, Inc.  
3576 Unocal Place  
Santa Rosa, CA 95403

Date Mailed: 09/20/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Terry Guinan, Galway, IRELAND;  
John Connolly, Galway, IRELAND;  
Pat Duane, Galway, IRELAND;  
Donagh O'Shaughnessy, Galway, IRELAND;  
Michael Bannon, Galway, IRELAND;  
**Ronan Rogers, Galway, IRELAND**

Domestic Priority data as claimed by applicant

## Foreign Applications

If Required, Foreign Filing License Granted 08/08/2001

Projected Publication Date: 12/12/2002

Non-Publication Request: No

Early Publication Request: No

## Title

Tip seal tip attach

Preliminary Class

604

**COPY**

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Data entry by : GIZAW, ASTER

Team : OIPE

Date: 09/20/2001

*[Handwritten signature]*

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Title 35, United States Code, Section 184  
Title 37, Code of Federal Regulations, 5.11 & 5.15**

COPY

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**PLEASE NOTE the following information about the Filing Receipt:**

- The articles such as "a," "an" and "the" are not included as the first words in the title of an application. They are considered to be unnecessary to the understanding of the title.
- The words "new," "improved," "improvements in" or "relating to" are not included as first words in the title of an application because a patent application, by nature, is a new idea or improvement.
- The title may be truncated if it consists of more than 500 characters (letters and spaces combined).
- The docket number allows a maximum of 25 characters.
- If your application was submitted under 37 CFR 1.10, your filing date should be the "date in" found on the Express Mail label. If there is a discrepancy, you should submit a request for a corrected Filing Receipt along with a copy of the Express Mail label showing the "date in."
- The title is recorded in sentence case.

Any corrections that may need to be done to your Filing Receipt should be directed to:

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Office of Initial Patent Examination  
Customer Service Center  
Washington, DC 20231